

APPLY ONLINE INSTEAD! Applications can now be submitted online at the Board's website at www.pels.arkansas.gov Electronic payment is available too!

**INSTRUCTIONS FOR COMPLETING THE PE APPLICATION
BY EXAMINATION, REINSTATEMENT OR RECIPROCITY OR COMITY**

Applications will not be processed if instructions are not followed.

1. ALL APPLICATIONS MUST BE TYPED! Please include your first, middle and last name.
2. Enclose one recent photograph of yourself taken within the last six months.
3. Ask your (5) references to type or print clearly with a ball-point pen when completing the form. Three must be current licensed professional engineers who are familiar with your work (not relatives and not members of this Board).
4. Complete the experience sheets fully – The Board Members are not familiar with your work, so your experience must be judged and evaluated on the information you furnish. Experience information must be detailed, concise, and complete as possible. Please account for all time after the age of 18 or high school graduation.

NOTE: Experience sheets for Reinstatements should account for all time since DATE OF ORIGINAL ARKANSAS APPLICATION.

5. FEES:
Make check payable to: Arkansas PE & PS Fund.
Application*:
Original: \$75.00
Reciprocal/Comity (for those PE's who are licensed in another state): \$200.00
Examination*:
Professional Engineering Exam (NCEES 8 hr): \$180.00
Structural 16 hour exam: 8 hour exams \$500 for each module

The Vertical Forces portion of the exam is always given on Friday, the Lateral Forces always on Saturday. You can take both days during the exam administration, or only one day during the exam administration. Both days must be passed in order to pass the exam, and you must pass both days within a 5 year period.

***THE APPLICATION AND EXAM FEES MUST BE SUBMITTED WITH YOUR APPLICATION.** All payments shall be non-refundable, unless waived by Board action. After your application has been approved you will need to contact NCEES to whom you will pay a \$100.00 fee for the administration of each exam/module.

TEMPORARY PERMIT: \$150.00 A temporary permit may be issued upon receipt of application and fees together with verification of ABET degree and both the FE and PE Examinations. We do not need to wait for your references. Please submit one check for \$350.00 payable to: Arkansas PELS Fund.

REINSTATEMENT LICENSURE: Call our office for information and fees.

6. Comity applicants using the NCEES Record, we need a total of five (5) references that are less than one (1) year old. If your NCEES record is over one (1) year old, you must submit (four) 4 additional references using the Arkansas Reference Forms.
 7. It is the responsibility of the applicant to forward all references and verification forms to the appropriate parties. We need a verification of your FE & PE Exams. Please feel free to call the AR Board if you would like to check the status of your application. Do not call this Board for results of examinations. As soon as you are licensed, your name will appear on our roster at our website.
 8. A signed and notarized copy of the Rules of Professional Conduct must be included with your application.
 9. Examinations are given in APRIL and OCTOBER:
Applications to be considered for the APRIL exam must be in the Board's Office complete by JANUARY 1st. This includes all five (5) references and verifications.
Applications to be considered for the OCTOBER Exam must be in the Board's Office complete by JULY 1st. This includes all five (5) references and verifications.
 10. Please visit our home page at www.pels.arkansas.gov or call our office at (501) 682-2824 for our physical street address. If overnighting your application packet, don't forget to provide our telephone number to the delivery company.
- IMPORTANT:** If any information or reference sheets are received in this office after the exam deadline, they will be placed in your file and retained for the next testing date.

General Requirements for Licensure & Certification
May be viewed on our website:
<http://www.pels.arkansas.gov/rulesRegsStandards/Pages/default.aspx>
Under Rules of the Board
Article 8

Engineer Interns in Arkansas:

Please disregard the Board Verification Form, we verify your Fundamentals of Engineering Exam. The Board verification form is for those who are not Arkansas Engineer Interns.

Comity Applicants

If you have a National Council Record, please request that your record be transmitted to Arkansas. Then disregard these forms:

Verification of College; however, you must list them on the application form under COLLEGE EDUCATION.

Verification of FE & PE Exams

Experience Sheets
(You may have no more than four (4) updates)

References

Arkansas requires five (5) references that are less than one year old. Please call NCEES, 864-654-6824, to make sure your references are within the current year. References included in your NCEES Council Record Form which are not current must use Arkansas' Reference Form. Note: you must also list your references on the application form under REFERENCES.

Reinstatement Applicants:

You may disregard the following form:

Verification of College

Experience Sheets must cover the period from original application to date.

Original Licensure:

Your BS Degree must be EAC of ABET or equivalent (if you are not sure visit www.abet.org or call 410-347-7700).

Comity Licensure:

Comity Applicants "must be deemed to have met the requirements for original Licensure as a professional engineer in Arkansas which were in effect at the time the applicant received their initial Licensure as a professional engineer." Please call Arkansas Board at 501-682-2824 for details.

**ARKANSAS BOARD OF LICENSURE FOR
PROFESSIONAL ENGINEERS AND
PROFESSIONAL SURVEYORS
P. O. Box 3750
Little Rock Arkansas 72203-3750
Phone (501) 682-2824 Fax (501) 682-2827
www.pels.arkansas.gov**

Date Application Received:

Check: _____

PE APPLICATION

Important -Do not complete this form until you read the instructions and the guidelines and you understand what is required. All information must be **typed** and all questions must be answered. Your application fee must accompany this form.

1. Name in full: _____ 2. Date: _____

3. If you have ever used another name, list here _____

4. S. S. No. _____

5. Phone #(O) _____ Ext. _____

(H) _____ Fax _____

6. Date of Birth: _____

7. E-mail address: _____

8. Mailing address: _____

Is mailing address company address? Yes ___ No ___

9. Employer: _____

10. Position: _____

11. Are you applying for written exam in Arkansas? Yes ___ No ___

12. Exam Discipline _____

Attach recent photo with face
not less than 3/4 inch wide.
Please tape sides down.

13. Photo taken _____mo/yr

14. Are you applying for Licensure by reciprocity or comity? Yes ___ No ___

15. Are you applying for reinstatement Licensure? Yes ___ No ___ AR PE # _____

16. Indicate below examination data and State

Fundamentals of _____ month/year Date issued _____
Engineering exam: State _____ Exam date: _____ EI # _____

Principle & Practice of _____
Engineering exam: State _____ Exam date: _____ EI # _____

17. State and Date of first Licensure as a PE State _____ Date _____

18. Have you previously filed an application with this Board for any purpose (includes Engineer Intern)?

Yes ___ No ___

19. Have you been denied Licensure in any State or Territory? Yes ___ No ___

State _____ Date _____

20. Have you ever been convicted of a crime (felony or misdemeanor, except traffic violation)? Yes ____ No ____
21. Have you ever been charged with a crime (felony or misdemeanor, except traffic violation), the disposition of which was other than by acquittal or dismissal? Yes ____ No ____
22. Have you ever been disciplined by another licensing Board that resulted in some type of enforcement action such as probation, letter of caution, letter of reprimand, censure, monetary penalty license revocation, etc.. regardless of whether the enforcement action was ordered or agreed to? Yes ____ No ____
23. Is any disciplinary action, complaint or enforcement action pending against you by another licensing board? Yes ____ No ____ (Affirmative answers to questions 18 thru 23 should be explained in Item 24).
24. Explanations of affirmative answers for questions 18 thru 23 on pages one and two _____
- _____
- _____

COLLEGE EDUCATION

*25. Institution Attended		Period of Attendance			Major	Date Graduated	Degree Received
Name	Location	From	To	Years			

REFERENCES

*26. Names and addresses of five (5) references of which three (3) must be current licensed Professional Engineers, who have personal knowledge of your character, professional reputation, and accomplishments. At least one (1) of the PE references must be from a current or previous supervisor.

Name	Address	Phone #	State of PE Licensure
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

*Please complete 25 and 26 even if you have requested that your NCEES record be forwarded to this Board.

29. Provide Experience Sheets
(Reinstatements: ACCOUNT FOR PERIOD(S) SINCE DATE OF ORIGINAL ARKANSAS LICENSURE)

30.

AFFIDAVIT CERTIFICATION, AUTHORIZATION AND RELEASE

State of _____ County of _____

Name of Applicant _____, being first duly sworn, deposes and says

I, the applicant named in this application, have read the contents hereof, and to the best of my knowledge and belief the statements contained in this application are true in substance and effect and are made in good faith and I hereby subscribe to and agree to conform with the Rules of Professional Conduct set forth in the Rules of the Board.

I also hereby authorize any individual, company or institution with whom I have been associated to furnish the Arkansas State Board of Licensure for Professional Engineers and Professional Surveyors with any information concerning my qualifications for professional Licensure in Arkansas which they have on record or otherwise, and do hereby release the individual company or institution and all individuals connected therewith from all liability for any damage whatsoever incurred by me as a result of their furnishing such information.

Subscribed and sworn to before me this:

_____ day of _____, 20_____

(Signature of Applicant)

(SEAL)

My Commission expires _____ day of _____, 20_____

(Signature of Notary Public)

NOTE TO APPLICANTS: It is your responsibility to see that the reference and verification forms are returned **directly** to the Board office. This application cannot be considered until all transcripts; verification forms and reference forms are returned.

RULES OF PROFESSIONAL CONDUCT

PREAMBLE

To comply with the purpose of the ARK CODE ANNO. 17-30-101 ET. SEQ. And ARK CODE ANNO. 17-48-101 ET. SEQ. Which is to safeguard life, health, and property, to promote the public welfare and to maintain a high standard of integrity and practice, the Arkansas State Board of Licensure for Professional Engineers and Professional Surveyors has developed the following Rules of Professional Conduct. These rules shall be binding on every person holding a Certificate of Licensure to offer or perform engineering or land surveying services in this state. All persons licensed under the ARK CODE ANNO. 17-30-101 ET SEQ. And ARK CODE ANNO. 17-48-101 ET SEQ are required to be familiar with the Licensure Statute and these Rules. The Rules of Professional Conduct delineate specific obligations the Licensee must meet. In addition, each Licensee is charged with the responsibility of adhering to standards of highest ethical and moral conduct in all aspects of the practice of Professional Engineering and Professional Surveying.

The practice of Professional Engineering and Professional Surveying is a privilege. All Licensees shall exercise their privilege of practicing by performing services only in the areas of their competence according to current standards of technical competence.

Licensees shall recognize their responsibilities to the public and shall represent themselves before the public only in an objective and truthful manner.

They shall avoid conflicts of interest and faithfully serve the legitimate interest of their employers, clients and customers within the limits defined by these Rules. Their professional reputation shall be built on the merit of their services and they shall not compete unfairly with others.

The Rules of Professional Conduct as promulgated herein are enforced under powers vested by the Arkansas State Board of Licensure for Professional Engineers and Professional Surveyors and the Rules of the Board. In these Rules, the word "Licensee" shall mean any person holding a license or a certificate issued by the Arkansas State Board of Licensure for Professional Engineers and Professional Surveyors.

I. LICENSEE'S OBLIGATION TO SOCIETY

- A.** Licensees, in the performance of their services for clients, employers and customers, shall be cognizant that their first and foremost responsibility is to the public welfare.
- B.** Licensees shall approve and seal only those design documents and surveys that conform to accepted engineering and land surveying standards and safeguard the life, health, property and welfare of the public.
- C.** Licensees shall notify their employer or client and such other authority as may be appropriate when their professional judgment is overruled under circumstances where the life, health, property and welfare of the public is endangered.
- D.** Licensees shall be objective and truthful in professional reports, statements or testimony. They shall include all relevant and pertinent information in such reports, statements or testimony.
- E.** Licensees shall express a professional opinion publicly only when it is founded upon an adequate knowledge of the facts and a competent evaluation of the subject matter.
- F.** Licensees shall issue no statements, criticisms or arguments on technical matters which are inspired or paid for by interested parties, unless they explicitly identify the interested on whose behalf they are speaking and reveal any interest they have in the matters.
- G.** Licensee shall not permit the use of their name or firm name by, nor associate in business ventures with, any person or firm which is engaging in fraudulent or dishonest business or professional practices.
- H.** Licensees having knowledge of possible violations of any of these Rules of Professional Conduct shall provide the Board information and assistance necessary to the final determination of such violation.
- I.** Licensees that are salespersons for or who represent a particular product or system shall qualify any public statement made concerning their product or system.

II. LICENSEE'S OBLIGATION TO EMPLOYER, CLIENTS AND CUSTOMERS

- A.** Licensees shall undertake assignments only when qualified by education or experience in the specific technical fields of engineering or land surveying is involved.
- B.** Licensees shall not affix their signatures or seals to any plans or documents dealing with subject matter in which they lack competence, nor to any such plan or document not prepared under their direct control and personal supervision.
- C.** Licensees may accept assignments for coordination of an entire project, provided that each design segment is signed and sealed by the Licensee responsible for preparation of that design segment.

- D. Licensees shall not reveal confidential facts, data or information obtained in a professional capacity without the prior consent of the client or employer except as authorized or required by law.
- E. Licensees shall not solicit or accept financial or other valuable consideration, directly or indirectly, from contractors, their agents or other parties in connection with work for employers or clients.
- F. Licensees shall make full prior disclosures to their employers or clients of potential conflicts of interest or other circumstances which could influence or appear to influence their judgement or the quality of their service.
- G. Licensees shall not accept compensation, financial or otherwise, from more than one party for services pertaining to the same project, unless the circumstances are fully disclosed and agreed to by all interested parties.
- H. Licensees shall not solicit or accept a professional contract from a governmental body on which a principle or officer of their organization serves as a member. Conversely, Licensees serving as members, advisors, or employees of a governmental body or department, who are the principals or employees of a private concern, shall not participate in decisions with respect to professional services offered or provided by said concern to the governmental body which they serve.

III. LICENSEE'S OBLIGATION TO OTHER LICENSEES

- A. Licensees shall not falsify or permit misrepresentation of their, or their associates; academic or professional qualifications. They shall not misrepresent or exaggerate their degree of responsibility in prior assignments nor the complexity of said assignments. Presentations incidental to the solicitation of employment or business shall not misrepresent pertinent facts concerning employers, employees, associates, joint ventures or past accomplishments.
- B. Licensees shall not offer, give, solicit or receive, either directly or indirectly, any commission, gift, or other valuable consideration in order to secure work, and shall not make any political contribution with the intent to influence the award of a contract by a public authority.
- C. Licensees shall not attempt to injure, maliciously or falsely, directly or indirectly, the professional reputation, prospects practice or employment of other Licensees, nor indiscriminately criticize other Licensee's work.
- D. Licensees who are aware of any alleged violations of the Law, Rules of the Board, or these Rules of Professional Conduct by a fellow Licensee may counsel with that Licensee to determine the facts. If correction is not made the Licensee shall report the violation to the Board and other proper authorities.

Signature

State of _____

County of _____

On the ____ day of _____, 20_____, before the undersigned, a Notary Public in and for the County and State aforesaid, came _____ a resident in the State of _____ known to me as the person herein described and subscribing hereto, as having signed the form of application on attached hereto, and on oath deposes and says that the statements made are true.

Subscribed and sworn to before me, this ____ day of _____, 20_____.

Signature Notary Public

NOTICE TO ALL APPLICANTS FOR REINSTATEMENT OR COMITY LICENSURE

(This form is for PE's licensed in another state)

The following questions must be answered in the space provided. Each question should be answered in detail.

1. The reason you wish to become licensed (reinstated) in Arkansas.

2. Information regarding any project in Arkansas on which you may have performed engineering services as a subordinate or employee of another licensed engineer. Please provide the name of the Professional Engineer in charge and Arkansas PE #. This includes work performed during the period your Arkansas license was not active.

3. The current project or projects in Arkansas on which you contemplate performing engineering services if the information is not confidential.

4. The status of plans or reports on any project in Arkansas for which you have been retained as the engineer.

Do not leave any line blank.

Signature: _____

Print Name: _____

OFFERING TO PROVIDE, CONTRACTING FOR OR PROVIDING ENGINEERING SERVICES PRIOR TO THE APPLICANT OR HIS FIRM BECOMING LICENSED MAY BE A VIOLATION OF THE BOARD'S LAWS AND RULES. (SEE A.C.A. § 17-30-102 AND ARTICLE 16 OF THE BOARD'S RULES [ON ITS WEBSITE AT WWW.PELS.ARKANSAS.GOV](http://WWW.PELS.ARKANSAS.GOV) under Rules/Regs/Standards). IF A VIOLATION OCCURS IT COULD SUBJECT THE APPLICANT AND FIRM TO DISCIPLINARY ACTION AND FINES AND/OR SIGNIFICANTLY DELAY OR PROHIBIT THE APPLICANT OR FIRM FROM BECOMING LICENSED.



**ARKANSAS
BOARD OF LICENSURE
FOR PROFESSIONAL ENGINEERS
AND PROFESSIONAL SURVEYORS**

P.O. BOX 3750
LITTLE ROCK, ARKANSAS 72203-3750
www.pels.arkansas.gov
Phone (501) 682-2824
Fax (501) 682-2827

Office of Registrar: _____ (College Name)

Applicant's First, Middle & Last Name: _____ S.S. #: _____

Birthdate: _____ Phone: _____

Dear Sir or Madam:

The above named individual has filed an application for Licensure with this Board. In regard to his/her education, he/she states as follows:

List Types of Degrees and Date Received:

ONLY a registrar may complete this form.

Registrar Completes: place college seal here

Correct: _____

Incorrect: _____

Registrar's name: _____

Phone number: _____

Date: _____

Please check your records and advise this Board as to the accuracy of that portion of his/her educational record which pertains to your school. Your cooperation in this matter will be sincerely appreciated.

Yours very truly,
Executive Director
ARKANSAS BOARD OF LICENSURE FOR PROFESSIONAL ENGINEERS
AND PROFESSIONAL SURVEYORS

NOTE: Applicant should complete top portion and forward to college with stamped envelope addressed to Arkansas Board, P.O. Box 3750, Little Rock, AR 72203-3750.

Board Verification Request Please include an envelope for your Board(s).

(If you are licensed in Arkansas, please disregard this sheet)

TO: Arkansas Board of Licensure For
Professional Engineers and Professional Surveyors
P.O. Box 3750
Little Rock, AR 72203-3750

FROM:

DATE _____

(Name of Applicant)_____
(Street Address)_____
(City) (State) (Zip)

Phone(_____)_____-_____-_____

Social Security_____-_____-_____

Date of Birth_____-_____-_____

I. THE ABOVE-NAMED PERSON WAS LICENSED AS:

	Certificate Number	Date Issued	Valid Until
() ENGINEER INTERN	_____	_____	_____
() PROFESSIONAL ENGINEER	_____	_____	_____
() SURVEYOR INTERN	_____	_____	_____
() PROFESSIONAL SURVEYOR	_____	_____	_____

Has this individual been continuously licensed? YES____ NO ____

List any gaps in license:_____

II. BASIS OF LICENSURE:

	Hours	Results	NCEES	Exam Date
1. () WRITTEN EXAMINATION	FE _____	_____	_____	_____
PE Application Date:_____	PE _____	_____	_____	_____
	FS _____	_____	_____	_____
	PS _____	_____	_____	_____

STATE SPECIFIC/OTHER: _____

() EXAMINATION OPTION: (DISCIPLINE)_____

2. () FE/FS ACCEPTED FROM:_____

() PE/PS ACCEPTED FROM:_____

3. () Was the NCEES cut score Used? YES____ NO ____ If NO, please
explain_____

4. () Were veteran preference points applied to the score? YES____ NO ____ If YES, please
explain_____

5. () Any disciplinary action taken () Enforcement Exchange Please explain on reverse side

III. REMARKS:

(Board Seal)

BY:_____

TITLE:_____

DATE:_____

A STAMPED, ADDRESSED ENVELOPE IS ENCLOSED FOR RETURN OF THIS FORM.
If a fee is required, notify the applicant by phone, please do not delay the processing of this form.

Engineer Reference

applying for ☐ PE exam ☐ PE reinstatement ☐ Comity

TO BE COMPLETED BY APPLICANT

Applicant's Name: _____

Address: _____

Phone #: _____

Have You And Respondent Been Employed By, Or Been Members Of The Same Firm? Yes _____ No _____

If Yes, Please Supply The Following Information:

From-To: _____

Name Of Firm: _____

City: _____

Applicant 's Position: _____

Respondent 's Position : _____

Have You Known Each Other In Other Circumstances? Yes _____ No _____ If yes, give dates and explain on separate sheet.

1. Is the above information correct as stated? Yes _____ No _____ If no, please explain on back of this form.

2. How long have you known the applicant? _____

3. Please define the individual's character and reputation. _____

4. What is your business relationship to the applicant? _____

5. Do you have personal knowledge of the applicants engineering work? Yes _____ No _____

6. Using the interpretations below, how do you rate the practice and quality of performance of the applicant's engineering work?

Type of Practice	Above Average	Average	Below Average	Unsatisfactory
Major Design	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsible Charge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Engineering Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INTERPRETATIONS:

Above Average: Performance unquestionably of a professional level demonstrating thorough competence and creative ability.

Average: Work not distinguished in content or level but adequate for engineering purposes indicating an ability, under some supervision, to produce workable designs of systems and products.

Below Average: Barely adequate performance, needing careful checking and rather close supervision to meet requirements.

Unsatisfactory: Work of poor quality, not up to minimum professional standards, requires review and revision by associates or supervisors before execution. Inadequate for "the purpose of safeguarding life, health and property".

7. I (would)(would not) employ applicant on a project where his/her decisions would be final because _____

8. The following is my evaluation of the applicant's ability as an engineer _____

PLEASE TYPE OR PRINT CLEARLY Name of Respondent: _____

Respondent's Current Engineering Licensure: State _____ *License # _____ Year _____

Name of Respondent's Firm: _____

Address: _____

Phone: _____ Signature: _____

Position In Firm: _____ Date: _____

*ALL NON-ARKANSAS P.E. REFERENCES MUST SUPPLY A COPY OF YOUR POCKET CARD OR A PRINTOUT FROM YOUR STATE BOARD'S WEBSITE OF YOUR LICENSE TO VERIFY CURRENT LICENSURE. Mail to: Arkansas Board of Licensure for Professional Engineers and Professional Surveyors, P.O. Box 3750, Little Rock, AR 72203-3750.

Experience Record for: _____ Date of Birth: _____ (m/yr) Date completed requirements for BS Degree _____ Date of Degree _____
 (Copy this page if you need more room for your experience.)
 (Read Instructions Carefully Before Completing this Section)

Engagement Number	Dates Mo. – Yr. From – To	TITLE OF POSITION, NAME OF EMPLOYER AND CHARACTER OF EACH ENGAGEMENT. Make statements concise and explicit, include nature, magnitude, and complexity of work on which engaged, your duties and degree of responsibility. LIST ENGAGEMENTS IN CHRONOLOGICAL ORDER, EARLIEST ENGAGEMENT AS NO. 1. DOUBLE SPACE BETWEEN ENGAGEMENTS. (Do not let description of engagements run into columns for date or time.) [ALL TIME SINCE HIGH SCHOOL OR AGE 18 (whichever is later) MUST BE ACCOUNTED FOR, INCLUDING MILITARY, ILLNESS, SCHOOL, UNEMPLOYMENT, ETC.]	Time Yrs. To decimals in tenths				Name, Title, PE number (if applicable) and Address of person most familiar with each engagement, preferably supervisor
			(1)	(2)	(3)	(4)	
			Non-Engineering (includes engineering work prior to completing requirements for BS Degree)	Engineering Experience after completing requirements for BS Degree & prior to PE Licensure	Professional Engineering Experience after PE Licensure	Total Engineering Experience (2) + (3)	

